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Exposure to domestic violence as abuse and neglect: Constructions of child maltreatment in daily practice



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ABSTRACT

Research finds that exposure to domestic violence can adversely affect the emotional, behavioral, and physical health of children. These effects have led some child advocates and policymakers in the United States to conclude that child exposure to domestic violence (CEDV) is a type of child maltreatment warranting state intervention. However, few states have defined CEDV as a type of maltreatment in statute and little is known about how child welfare agencies respond to allegations of CEDV in the absence of other safety threats. This study considers that CEDV itself might prompt an initial child welfare referral and may be construed by workers as a type of statutory maltreatment. Using a random sample (n = 295) of case records, this study analyzed one large child welfare agency's response to referrals alleging CEDV between 2011 and 2012. Findings indicate that CEDV itself did trigger investigation. At time of referral, workers used statutory maltreatment typologies to construe alleged CEDV as a type of maltreatment; however, CEDV was not consistently construed as a safety threat and few allegations were substantiated. Instead most families were referred to community-based domestic violence services. Findings indicate that CEDV was not consistently construed as a type of statutory maltreatment and infrequently resulted in ongoing child welfare services. Findings suggest that training is needed to help workers better assess CEDV-related safety threats. Findings also raise questions about what types of interventions are needed to protect children from domestic violence and which types of agencies are best positioned to deliver those interventions.

1. Introduction

In recent years increased attention has been given to how domestic violence adversely impacts children. It is estimated that between 16–25% of American children are exposed to domestic violence during childhood (Finkelhor, Turner, Shattuck, & Hamby, 2015; McDonald, Jouriles, Ramisetty-Mikler, Caetano, & Green, 2006). Researchers find that children exposed to this type of violence exhibit higher rates of emotional, behavioral, and physical health problems (Evans, Davies, & DiLillo, 2008; Felitti et al., 1998; Holt, Buckley, & Whelan, 2008; Kitzmann, Gaylord, Holt, & Kenny, 2003), and are at greater risk for child maltreatment than their non-exposed peers (Edleson, 1999; English et al., 2009; Osofsky, 2003). These findings have led some to conclude that child exposure to domestic violence (CEDV) – the seeing, hearing, experiencing, or witnessing the aftermath of domestic violence – is a form of child maltreatment warranting public intervention. To date, few states in the U.S. define CEDV as a type of child maltreatment in law (Child Welfare Information Gateway, 2016); however, it is thought that child welfare workers (hereafter *workers*) sometimes use existing child maltreatment statutes to construe CEDV as a type of child abuse or neglect (Coohey, 2007; Henry, 2017; Kantor & Little, 2003).

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While a number of studies have documented the co-occurrence of domestic violence and other types of child maltreatment among child welfare involved families, this paper considers the possibility that concerns about CEDV itself and its adverse effects might prompt an initial child welfare referral and may, at times, be construed by workers as a type of child maltreatment. Through case record review and analysis of administrative data, this study aims to expand understanding of child welfare practice, by examining if and how workers in a large public child welfare agency use existing child maltreatment statutes to construe CEDV as a type of maltreatment in daily practice.

1.1. Domestic violence among child welfare involved populations

Over the last two decades, numerous studies have examined the prevalence of domestic violence among child welfare involved families and their pathways through the child welfare system (Beeman, Hagemeister, & Edleson, 2001; Black, Trocmé, Fallon, & MacLaurin, 2008; Bogie, Freitag, & Healy, 2012; English, Edleson, & Herrick, 2005; Kohl, Edleson, English, & Barth, 2005; Shepard & Raschick, 1999; Victor, Grogan-Kaylor, Ryan, Perron, & Gilbert, 2018). Overall, these studies find high rates of domestic violence among child welfare involved families (Beeman et al., 2001; Black et al., 2008; English et al., 2005; Kohl et al., 2005; Shepard & Raschick, 1999) and that domestic violence and child maltreatment often co-occur. For example, a study of 74 randomly selected child welfare case records in a small midwestern city found that nearly a third of child welfare case records indicated domestic violence (Shepard & Raschick, 1999). Review of child welfare case records in New Hampshire (Kantor & Little, 2003) and a large urban center in Minnesota (Edleson & Beeman, 1999) found similar rates (36%). A statewide study conducted in Washington found that domestic violence was indicated in 20% of referrals received and in 38% of cases that were accepted for investigation. Data from the National Survey of Child and Adolescent Well-Being (NSCAW), a national probability study of children investigated for child maltreatment and a history of domestic violence among 19% of the families investigated (Kohl et al., 2005).

1.2. CEDV as child maltreatment

Few U.S. states explicitly define CEDV as a *type* of child maltreatment in statute (see Utah Civil Code §78A-6-105 and West Virginia Code Ann. § 49-1-201 for exceptions). However, existing maltreatment typologies are thought broad enough to allow for CEDV to be treated as type of abuse or neglect (Henry, 2017). Thus, in administrative data, allegations of CEDV are likely nested within dominant child maltreatment typologies, such as physical abuse, emotional abuse, and neglect.

This nesting obscures both the prevalence of CEDV among child welfare involved families and the child welfare response to this phenomenon. Moreover, the failure to distinguish between allegations of CEDV and other recognized types of maltreatment may lead to inaccurate estimates of co-occurrence. That is, what is counted as co-occurrence may in fact be the labeling by workers of CEDV as physical abuse, emotional abuse, or neglect (Henry, 2017).

To date, most studies that isolate CEDV among child welfare involved populations and the child welfare response have been conducted in Canada, where CEDV is defined as a distinct type of child maltreatment in provincial law. An examination of a national sample of substantiated child maltreatment referrals received by child welfare systems in Canada in 2003 found that over one third (34%) of substantiated referrals involved CEDV (Black et al., 2008). Nine percent alleged exposure to domestic violence and another form of child maltreatment (co-occurrence), but for 25% of these referrals CEDV was the *only* type of maltreatment alleged. After controlling for other referral and family characteristics, the study found that referrals that alleged CEDV and no other maltreatment were significantly less likely than all other referrals to result in out-of-home placement. Likewise, a review of clinical and administrative data from a child welfare agency in Montreal, Canada found that referrals that only alleged CEDV did not lead to ongoing child welfare services or out-of-home placement (Lavergne et al., 2011).

Review of the literature found no published studies from the U.S. that isolate referrals that only allege CEDV from those that allege co-occurrence. However, one study in California offers an approximation. In California, all county child welfare agencies are required by law to screen investigated referrals for indications of domestic violence. If a worker determines that domestic violence exists in the home *and* poses an imminent danger of serious physical and/or emotional harm to the child, domestic violence is recorded as a *safety threat* in a standardized safety assessment tool. In their analysis of investigated referrals received in 2011, Bogie et al. found that workers identified domestic violence as an active safety threat in 6% of investigated referrals; two-thirds of these indicated that domestic violence was the only active safety threat facing the children in the home, while the remainder indicated domestic violence and at least one other active safety threat were present. Similar to Black et al.'s (2008) findings, Bogie et al. found out-of-home placement was rarely recommended for referrals where domestic violence was the *only* safety threat. If, however, domestic violence co-occurred with another safety threat, the removal rate was significantly higher (Bogie et al., 2012).

1.3. Workers' constructions of child maltreatment

While the aforementioned studies offer some insight into the prevalence of CEDV among child welfare involved families and the child welfare response, more research is needed to understand if and how, in the absence of clear legislative mandates, workers in the U.S. construe CEDV as a type of maltreatment.

In recent years, a handful of scholars have begun this work by examining the U.S. child welfare response to CEDV through interviews with workers (Hughes & Chau, 2013; LaLiberte, Bills, Shin, & Edleson, 2010) and case record reviews (Coohey, 2007; Jones, 2007; Lavergne et al., 2011). These practice-centered studies illuminate how workers both interpret and make child welfare

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